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79681 7590 09/23/2008 Baker & Hostetler LLP				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United		
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New York, NY 1		her hes	hie	(Depositor's name)		
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				श्रु ठ	Dec 1000	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	^^	TTORNEY DOCKET NO.	CONFIRMATION NO.
09/269,897	04/02/1999		KATSUMI AOYAGI		4047	1769
TITLE OF INVENTION:	METHODS FOR THE	DETECTION OF HEPA	TITIS B AND C VIRUSE.	S		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	PEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$0	\$0	\$1440	12/23/2008
EXAMI	NER	ART UNIT	CLASS-SUBCLASS			
ZEMAN, ROBERT A 1645			435-007100			
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Change of corresponded Address form PTO/SB	indence address (or Cha	inge of Correspondence	or agents OR, alternatively,			
"Fee Address" indi-	cation (or "Fee Address	" Indication form led. Use of a Customer	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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(A) NAME OF ASSIG		أداما الما	(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
cerement has sum a first the						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 📈 Corporation or other private group entity 🚨 Government						
4a. The following fee(s) a	re submitted:	41	Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)			
Issue Fee Publication Fee (No small entity discount permitted)			☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.			
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